

DOCUMENT A00820

**Massachusetts Department of Transportation
Conditions of Custody****REQUEST FOR RELEASE OF MASSDOT AUTOCAD FILES FORM**

(Only to be used following award of contract)

City/Town: WILMINGTONProject File Number: 608929Contract Number: 123406Project Description: Bridge Replacement, W-38-003, Butters Row over MBTA

All AutoCAD files are provided solely as a courtesy to facilitate public access to information. MassDOT attempts to provide current and accurate information but cannot guarantee so. MassDOT provides such documents, files or other data "as is" without any warranty of any kind, either expressed or implied, including but not limited to, accuracy, reliability, omissions, completeness and currentness. The Commonwealth of Massachusetts and its Consultants shall not be liable for any claim for damages, including lost profits or other consequential, exemplary, incidental, indirect or special damages, relating in any way to the documents, files or other data accessible from this file, including, but not limited to, claims arising out of or related to electronic access or transmission of data or viruses. Because data stored on electronic media can deteriorate undetected or be modified without our knowledge, MassDOT cannot be held liable for its completeness or correctness. MassDOT makes no representation as to the compatibility of these files beyond the version of the stated CAD software.

By signing this form, I agree that it shall be my responsibility to reconcile this electronic data with the conformed contract documents, and that only the conformed contract documents shall be regarded as legal documents for this Project. I understand that this authorization does not give me the right to distribute the files. I agree to the terms above and wish to receive the AutoCAD files.

This signed form shall be emailed to the Highway Design Engineer at the MassDOT -Highway Division at the following email address:

DOTHighwayDesign@dot.state.ma.us

Attn: AutoCAD Files

Name of person requesting AutoCAD files: _____

Affiliation/Company: _____

Address: _____

Telephone number: _____

Email address: _____

Signature/Date: _____